			Uhv I.	9 RA * **	-	6 4							
								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								0959086					
CLAIMS AS FILED - PART I								ALL	ENTITY	794 21	77.		
-			(Column 1) (Column			umn 2)		TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS								ATE	FEE	]	RATE	FEE	
FOR ·			NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FEE 355.		OF	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		•		x	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		•		×	X40=		OR	X80=		
М	JLTIPLE DEPE	NDENT CLAIM F	RESENT				+135=			IOR			
•	f the difference	in column 1 is	less than z	ess than zero, enter "0" in column 2			TC	TAL		OR	L		
CLAIMS AS AMENDED - PART II									· L	70	OTHER	THAN	
(Column 1) (Column 2) (Column 3)							SN	ALI	LENTITY	OR	SMALL	ENTITY	
AMENDMENT A	A	REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA	. FV	NTE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 24	Minus	.73		= 2	X	9=	17	OR	X\$18=		
	Independent	. 6	Minus	3		= 3	X/	0=	134	1	* X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								198	OR			
			•				+13	35=		OR	+270=		
						•	ADDIT	OTAL FEE		OR	TOTAL		
_		(Column 1)		(Colum		(Column 3)	1			_ :	in Service		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE	in.	RATE	ADDI- TIONAL FEE	
	Total	. 79	Minus	• 2	LY.	= \	X\$	8=·		OR	X\$18=		
	Independent	• 1	Minus	***	6	=	X4	0=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPEN				CLAIM			· · · ·	,	(	070		
		•					+13	DTAL	* *	OR	\ <del>270=</del>		
							ADDIT			OR	TOTAL ADDIT, FEE		
_		(Column 1)	7.1 %	(Colum		(Column 3)				- 4			
MEN		REMAINING AFTER - AMENDMENT		NUMB PREVIO	ER USLY	PRESENT EXTRA	RA	TE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=	X\$	9=		OR	X\$18=	-,,,,	
	Independent	•	Minus	***		<b>=</b> '				£. *			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						X4	/= 		OR	X80=		
									A 1	OR,	+270=		
"If the entry in column 1 is less than the entry in column 2, writ "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or independent) is the highest number lound in the appropriate box in column 1."													
1	ne Trignest Numl	DEF PTEVIOUSIY PAIC	ror (Total or	rindepender	nt) is the	highest number	lound in t	uo st	propriate box	t in col	umn 1."	I	

FORM PTO-675 (Rev. 8/00)

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